

Unintentional Poisonings: Response & Recommendations

Joint Legislative Health Care Oversight Committee

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Chronic Disease and Injury Section

Division of Public Health

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North Carolina
Injury & Violence 
 PREVENTION Branch



Historical DPH Response

- 2000-01: DPH sees increases in unintentional poisoning deaths
- 2002: NC asks CDC for 1st Epi-Aid Team to address issue
- 2003-2004: As result of Epi-Aid Team, Joint Task Force convened to make recommendations

Task Force Report 2004

**Findings and Recommendations
of the Task Force to Prevent Deaths from
Unintentional Drug Overdoses
in North Carolina, 2003**

Submitted to

Carmen Hooker Odom, Secretary, Department of Health and Human Services
Roy Cooper, Attorney General, Department of Justice
April 2004



N.C. Department of Health and Human Services
Division of Public Health
Injury and Violence Prevention Branch

Groups included:

SBI, DEA, DPH, Substance Abuse,
Justice, Medical Examiner's Office

43 recommendations:

Leadership, Surveillance, Law
Enforcement, Legislative, Education,
Clinical Interventions

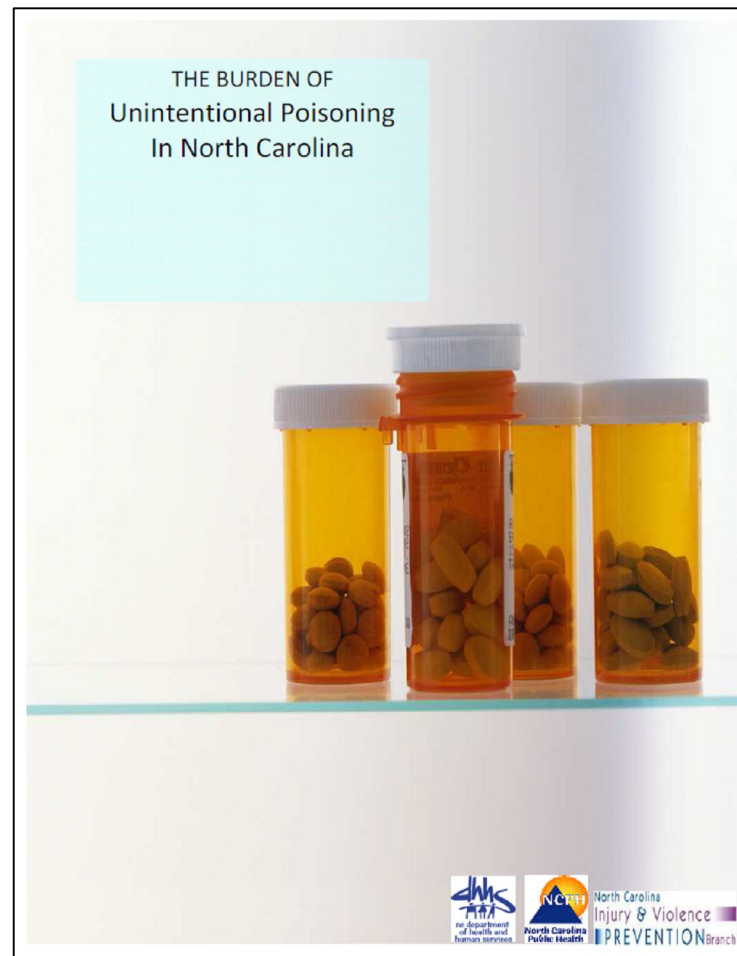
**Controlled Substance Reporting
System (CSRS)- NC PMP**



Ongoing Efforts Since 2005

- 3 County study to assess circumstances around deaths
 - Data from CSRS, law enforcement, VR, ME
 - Wilkes, New Hanover, Durham
- NC Detect and ED data
- Community/County- Promising Projects
- Continued NC evaluation (Burden document)

Burden of Poisoning Report (2009)



www.injuryfreenc.ncdhhs.gov/DataSurveillance/PoisoningBurden.pdf

State Response Since 2005

- Narcotics Task Force (Medicaid)
- CSRS (July 2007)
- Statewide Strategic Plan- Injury/Violence Prevention
 - Poisoning is top priority
- SBI
 - Dedicated staff unit
- Medical Examiner's Office
- Governor's Institute on Alcohol and Substance Abuse
- Carolina Poison Center
 - Informs public on hazards of prescription medications
- SafeKids NC
 - Medication Drop Off with 1.4 million morphine equivalent doses
- NC IOM Healthy NC plan



Future Work to Address Issue

- Increase DPH surveillance activities
- Provide overall coordination between all on-going efforts with leadership commitment and clarification of roles and responsibilities
- Identify funding opportunities for evaluating pilot project effectiveness and spreading interventions that work

Promising Projects



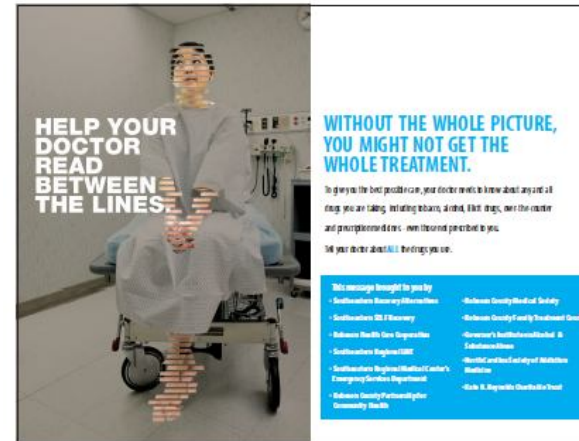
- Safer Opioid Prescribing Initiative (2008); funding from Governor's Institute (GI), Division of MHDDSAS, KBR
- Over 20 regional educational events (focus on Eastern Counties) for prescribers of controlled substance (on-going since 2009)
- Emphasis on CCNC Networks and FQHC
- Local resources identified, TA and clinical tools provided to practices, with patient handouts; instruction about safe patient storage and disposal

Billboards

Trainings



Newspaper Ads



SAFER OPIOID PRESCRIBING

Tuesday, October 26, 2010 - 5:30PM - 9:15PM
 Chef & the Farmer Restaurant
 120 West Gordon Street
 Kinston, NC 28501

Dinner, CME and dialogue with concerned professionals.

This program is designed for physicians, nurse practitioners, physician assistants, pharmacists, and dentists.

Free to Attend!

GOVERNOR'S INSTITUTE ON ALCOHOL & SUBSTANCE ABUSE
 NC Center of Excellence for Integrated Care
 SOUTHERN REGIONAL ANHC

SOME THINGS DON'T GO TOGETHER

When prescription pain medications are mixed with alcohol, sleep aids, anti-anxiety medications, or illicit drugs the result can be extreme drowsiness, trouble breathing, or death.

COASTAL HORIZONS CENTRA, INC.
 New Hanover Regional Medical Center
 New Hanover Community Health Center
 New Hanover County Substance Abuse Facility Task Force
 GOVERNOR'S INSTITUTE ON ALCOHOL & SUBSTANCE ABUSE

For more information visit www.pillscankill.org or talk to your medical provider.

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Drug Turn In Events

New Hanover Community Health Center

Drive-Thru Drop-off Drug Event!
 Saturday, August 7th at NHCHC from 10:00 am to 2:00 pm

PILLS CAN KILL!

Disposing of unused and expired drugs keeps you, your family, and our community safer!

In Collaboration with **KUTLER & SONS** & **GOVERNOR'S INSTITUTE ON ALCOHOL & SUBSTANCE ABUSE**

New Hanover Community Health Center
 925 N. 4th Street | Wilmington, NC 28401 | 910.343.0270
 Providing Family Medicine and Dentistry
www.nhchc.net

Community Collaboration

Promising Projects

- Other initiatives to integrate substance abuse identification and treatment in primary care:
 - Center of Excellence for Integrated Care-3 year funding from HWTF and DMA
 - CCNC expanding Safer Opioid Prescribing Initiative
 - KBR awarded 16 grants to governmental and nonprofit organizations in NC to integrate substance abuse into primary care medical homes



Project Lazarus

- Innovative community intervention focused on avoiding and responding to opioid overdose; includes provision of naloxone (opioid overdose antidote)
- Wilkes County has taken the lead, but effort across NC, the Cherokee Reservation, and Fort Bragg
- Training for
 - medical providers (identifying at-risk patients, naloxone),
 - patients and their family or peers (plan, recognize and respond to overdose) including a free overdose rescue kit

Lessons Shared Between States

- NC Task Force is a model
- Ohio Prescription Drug Abuse Task Force
 - \$500K social marketing campaign, links to policy and providers
- Washington-
 - “Take as Directed” campaign and stronger provider guidelines
- NM- Good Samaritan law
 - Immunity to those needing medical assistance for illegal use
- KY-
 - Interstate data sharing from prescription monitoring system
- WV-
 - Evaluation of connections between misuse, abuse and diversion
- Maine-
 - Safe Medication Disposal

Moving Forward


Enhancements to CSRS can increase value to agencies across the state

- Photo ID requirement
- Allow Physician-Designee Accounts for clinical practices
- Change penalty for misuse of data
- Require all physicians dispensing drugs to report to CSRS
- Adopt interstate data sharing agreement



Moving Forward

- Supporting licensing and training of Pain Clinics who dispense controlled substances
- Support requirement to create prescribing guidelines for controlled substances
- Support 'Good Samaritan' law offering limited liability for medical emergency reporting and use of naloxone



In 2009, NC had over a 1,000 deaths from unintentional poisonings, second only to motor vehicle crashes in the area of injury death